Cambridge Department of Human Services Youth Programs Photo Release Authorization Form

I	(parent/guardian) give
permission for	(child's name) picture to be
displayed on the official city Website representing Cambi	ridge Youth Programs. I
understand that I can remit this authorization and have the	e picture removed from the
Website at any time by providing written notice to the Cit	ty of Cambridge Department of
Human Services.	
Child's Name	
Parent/Guardian Signature	
Date	